

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4810).		Complete if Known	
FEE TRANSMITTAL For FY 2005		Application Number	10/054,284-Conf. #6316
		Filing Date	November 13, 2001
		First Named Inventor	Markus ANDREASSON
		Examiner Name	Y. Kassa
		Art Unit	2624
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	4830-0108P
TOTAL AMOUNT OF PAYMENT (\$) 120.00			

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number <u>02-2448</u> Deposit Account Name <u>Birch, Stewart, Kolasch & Birch, LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES		
Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fees Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fees Paid (\$)
_____	_____	_____	_____	_____	_____	_____
HP = highest number of total claims paid for, if greater than 20.						
Indep. Claims	Extra Claims	Fee (\$)	Fees Paid (\$)			
_____	_____	_____	_____			
HP = highest number of independent claims paid for, if greater than 3.						

3. APPLICATION SIZE FEE					
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).					
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fees Paid (\$)	
_____	_____	_____	_____	_____	_____
- 100 = _____ / 50 _____ (round up to a whole number) x _____ = _____					

4. OTHER FEE(S)		Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)		_____
Other (e.g., late filing surcharge): <u>1251 Extension for response within first month</u>		<u>120.00</u>

SUBMITTED BY <u>Kenny Caudle</u>			
Signature	<u>Kenny Caudle</u>	Registration No. (Attorney/Agent)	29,680
Name (Print/Type)	<u>Michael K. Mutter</u>	Telephone	(703) 205-8000
		Date	October 13, 2006